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Transformation of society, social policy and social work in Slovakia

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Abstract

Authors focus on development of society, social policy and social work after groundbreaking democratic changes in 1989 in Slovakia at different fields of social affairs. Transformation processes in all fields were different, but based on the same fundamentals. These were the move from socialism to democracy, from centrally planned to market economy, from paternalism to individual responsibility, participation etc. The changes in society as a whole determinate the changes in social policy and these affect the process of re-establishing of social work as a professional and scientific discipline. Particularities of these causal relationships are discussed in this paper as well as main steps of transformation processes in each field.

Key words

Slovakia, Transformation, Society, Social Policy, Social Work, Civil Society, Social Security, Subjective Wellbeing

Introduction to transformation process

There was a strong need for transformation of society, social policy as well as social work after the „Velvet revolution,, in 1989 due to considerable changes of political, economical and social systems. As the previous system was substantially paternalistic characterized by massive dominance of state (the only employer, provider of majority of social services, the only source of finances for social system, etc.), it does not fit the new situation and transformation of the system was indispensable. Transformation process was not straight due to frequent changes in political leadership, changes in pace of economical development, etc. Different fields of social affairs undertake different ways of transformation, with many similarities as well as many differences.

Principles and civil society

Ten main principles were defined in the transformation process: (Tomeš, 2010). **Demonopolization** aims to ensure plurality of subjects, abolish the exclusive role of state and create a space for NGO subjects. **Decentralization** of public sphere as a principle of transformation should move social protection as close as possible to people, implement subsidiarity and move rights and responsibilities to regional and local authorities. Principle of **democratization** focus on legal independence of institutions and inclusion of self-governing elements in the administration (administrative and supervisory boards, Commission, etc.). **Modification of object** should change the position of an individual. Client should not be perceived as a member of the group but as an individual with particular needs. **Pluralisation of sources** should ensure creation of multisource system of financing of social policy and leave system, where state budget is the only one source of financing of social policy. **Pluralisation of types and forms** should lead to superseding of non-alternative systems by plural systems of social protection. **Humanization** focuses mostly on social services and emphasise non-marginalization of individuals with problems and tendency to provide of assistance in natural surroundings. **Reconfiguration to needs** should ensure that social protection will be adequate in terms of time, extent, intensity of problem, etc. The aim of **personification** was to approximate provider of assistance and the client, support the reliance and confidence in social protection. **Professionalization** as the last principle aims to implement professionals in social protection, especially in terms of re-establishing university education in Social Work and related study programs.

Most of the principles were strongly related to development of civic society, massively suppressed during the period of socialism. After the fall of communism, new freedom and opportunities for civic activism and association have opened and new activities started to flourish. New actors – active citizens and their structures – nongovernmental organizations (NGOs) and other independent bodies – started to play an increasing role in the Slovak society. New sphere of societal life – civil society – has been gaining in its importance (Marček, 2008).

For Slovakia's civil society, the period 1993 – 1998 can be seen as one of years spent learning, gaining experience and building up the sector. Foreign funding aimed primarily at the building of civil society in Slovakia was made available (Brezani, 2013). But it was also an era of autocratic shift in the governing of the country. Slovak civil society was therefore shaken from its complacency to mobilize against this new threat. Slovak NGOs and Slovak civil society had to unite and fight against principles of autocracy (Feffer, 2013).

During the second period (1998 – 2004) the domestic political situation had improved significantly due to the change of government. Consequently, Slovakia found itself back on track towards the EU, and became an OECD member. Slovakia transformed itself from recipient to donor.

The third period which can be framed by Slovakia's EU membership and implementation of the two medium-term ODA strategies *Medium-Term Strategy for Official Development Assistance: 2003–2008*, Bratislava: Ministry of Foreign Affairs of the Slovak Republic, 2003 and *Medium-Term Strategy for Official Development Assistance: 2008–2013*, Bratislava: Ministry of Foreign Affairs of the Slovak Republic, 2008 (Brezani, 2013).

The restoration of the autonomy of the individual and civil society has become the main task in preventing the expansionism of the state, though it does not express that such a danger is connected only with state, because its source also exists in a civil society. State can then only

be used as a kind of power instrument. Therefore the restoration of civil society also has this qualitative dimension—it requires the restoration of democratic citizenship and civil virtues (Šamalík, 1995).

Civil society in Slovakia faces several constraints and challenges and lacks a supportive legal and fiscal environment. The economic and financial crisis continues to hit the sector hard (EEA Grants, 2013). A look on empirical data shows many difficulties and obstacles. In his research on civil society M. M. Howard presents empirical findings that constitute the crucial “baseline,” a comparative measure of participation in voluntary organizations across a wide set of countries. The results show that post-communist countries are almost exclusively grouped at the lowest levels of organizational membership. Moreover levels of membership in post-communist countries have declined significantly, especially when compared to those in the post- authoritarian countries. With the partial exception of labor unions, participation in voluntary organizations is much lower in post-communist countries than in the older democracies and the post-authoritarian countries (Howard, 2003). People may have the idea that only activities that bring material benefits, or rewards, can be considered meaningful (Onyx, Warburton, 2003). The involvement outside personal interests is thus low. However, the trend in a post-modern world is just the opposite, citizens should be involved in public interest. Social and political networks should be organized horizontally, not hierarchically. Thus, in these communities, the important task is to strengthen the civic solidarity, civic participation and integrity. In this context, volunteering is a fundamental phenomenon and its importance in the globalized society of the third millennium will only increase. Volunteering helps the civil society to eliminate negative phenomena at the individual and societal level (Pavelek, 2013).

Period of crisis solutions in social policy

The first years of transformation of social policy could be called more accurately the period of “crisis solutions“ in social policy due to new and acute social problems, that doesn't exist before or were not visible, were hidden or marginalized.

The main changes in the first years after 1989 could be divided to four main areas: Employment policy, wage policy, family policy and social security. (Botek, 2009)

Employment policy: Before 1989 employment was an obligation for all people in productive age (except tenably unemployed). Unemployment was understood as a crime with sentence from 3 to 5 years. State was the only one employer. To provide sufficient number of jobs, these were created artificially – often by employing more people for one job. This fact leads to lowering the productivity and efficiency of the employee. Privatization after 1989 brings new social phenomenon - unemployment (due to abrogation of artificially created work places). As there were no institution for unemployed, labor offices had to be created with main functions: To provide of assistance for unemployed people at labor market and realize financial assistance. Employment Act was introduced in 1991. (Sociálna politika v Slovenskej republike v roku 2001, 2002)

Wage policy: As state was the only employer before 1989, all wages were centrally regulated and minimal wage did not exist. Central wage regulation was based on three main domains: a/ fulfilling of the plan, b/ qualification and duration of the practice, c/ so called “social usefulness” – made peasants and manual workers advantageous to intellectuals. After

privatization new private employers appeared at labor market and conditions had to be changed. Minimal wage was established in February the 1st 1991. Act 1/1992 abolished central wage regulation and introduced individual and collective bargain.

Family policy: There was a substantial move from pro-natality policy to higher protection of families, especially those in risk of poverty. This trend was mostly caused by reduction of finances to area of family policy, before 1989 one of the most financed areas of social policy. This could be observed especially in changes in family benefits system, reduction of preschool institution, and transformation from institutional to more family oriented forms of substitute care.

Social security: Transformation of social security was one of the crucial points of transformation. Previous system was universal, characterized by obligatory allowances, financed from state budget with domination of flat rate benefits, supplemented by social care and subvention of basic products and services. Social insurance as one of three main pillars of social security was nearly destroyed. State dominates social security as provider as well as financial source and social support massively dominate in social security. The main aim after 1989 was to transform “social care to social assistance”. Act 463/1991 of living minimum was introduced and had established poverty line. Act 43/1991 introduced valorization of pensions due to increase of living costs. National insurance company was established in 1994, in 1995 divided to Social Insurance Company and Health Insurance Company. (Botek, 2009)

Period of transformation

Year 1996 brings substantial move from already mentioned period of “crisis solutions” to real transformation process. This could be observed in variety of complex conceptions as Conception of State Family Policy, Conception of Employment Policy, introduction of supplemental pension insurance, etc. Subsequent years brings important changes, just to mention: Act 50/1995 on Social Security, Act 195/1998 of social assistance, Transformation of Pension system (2003) – implementation of three pillar system, creation of capitalization pillar, Act 461/2003 of Social Insurance, transformation of social services (2006) and new Social services Act 448/2008. (Botek, 2009)

Current state

Implementation of some of the principles was quite successful, some principles are still not reached, especially demonopolization, decentralization and pluralisation of sources. As shown in the table 1, general government contributions are still the highest in Slovakia and Czech Republic, and so state is still the main source of financing of social protection and although there is a space for non-governmental subjects, state still plays the main role in providing of social services.

Table 1 Receipts of social protection by type (as % of total receipts) in EU countries

Country	General government contributions (%)	Employer´s social contributions (%)	Social contribution paid by protected persons (%)	Other receipts (%)
Slovakia	46,1	21,5	25,8	6,7
Finland	38,4	11,2	43,7	6,7
United Kingdom	32,4	11,4	49,4	6,7
Czech republic	53,1	26,3	19,4	1,1
Germany	34,9	28,2	35,0	1,9
France	43,8	20,8	32,0	3,4
Italy	40,2	16,0	42,2	1,6

Source: Statistical Office of the SR, 2011

As successful story we can define transformation of social security system, although there is a space for improvement. However we can say that current social security is meeting the European standards; three pillar system (social insurance, social support and social assistance) is well established.

Social insurance consists of five types of insurance: Sick insurance, Pension insurance (three pillar system), Accident insurance, Unemployment insurance and Clause insurance. Transformation of pension system was one of the most important changes. Current pension insurance consists of three pillars: 1st compulsory - (organized and guaranteed by state), 2nd voluntary (capitalizational) - (organized and guaranteed by state and pension companies) and 3rd voluntary (private).

Social support focus on selected family situations and provide variety of flat rate benefits: Child birth benefit, Child birth extra benefit, Parental benefit, Funeral benefit, Foster care benefits, etc.

Social assistance consists of three major sub-systems: Financial assistance, Social services and Compensation of health handicaps. Financial assistance is based on means testing and consists of Material need allowance, Extra allowance in material need, Protection allowance, Activation Allowance and Health Allowance.

Social services are the part of public services in which there is a high motivation to help all people who are in need. Since the beginning of the 90th were gradually introduced a new principles of social services into a life of society, which are commonly applied in social systems of developed European countries. Social services have these principles:

- monopolisation of social services,
- decentralization of the state social services,
- democratization of social administration,
- pluralization of financing social services,

- change in the status of a person in providing social services,
- pluralization of forms of social services, the adequacy of social assistance social needs, personification of social assistance, social assistance professionalization.

Since 2009, these services are part of a separate social assistance, as one of the three fundamental pillars of social security/welfare. Their aim is to promote and develop the social inclusion of people who are not by their fault find themselves in unfavorable social situation (disability, chronic disease with a reduction in mental and physical abilities), or are in the senior age and need special care. From Act on social services it is clear that social services are professional, utility and other activities with main purpose to help people in need. Social services are focused on:

- prevention, solution or reduction of unfavorable social situation,
- enhancing of abilities of clients to lead independent live and to promote their integration into society,
- ensuring of the necessary condition to satisfy basic living needs,
- solution of critical social situation,
- Prevention of social exclusion.

The role of social services is not only a solution to the crisis of the social situation of the individual and the family, but also to prevent social exclusion of natural persons and families. Social services have three basic features that distinguish them from other public services. These functions include: *"support function, which has the task of assisting individuals to benefit from resources that the company offers, self-updating the feature helps individuals know what show most normal way of life and the last, the third therapeutic function that eliminates the existing threat of pathology"* (Majlingová et al, 2002).

According to the current Act on social services in Slovakia it is possible to distinguish various types of social services for different social and age groups that are provided in several forms. Within the concept of de - institutionalization is prioritized fieldwork form of social services in the natural - domestic environment of an individual, and ambulant form and then subsequently the form of providing social services in social services institutions in year – round form, or weekly.

Social care and health care in institutions of social services represents the largest part of social services. It is provided by public and private (non - public) providers registered in the relevant departments of social services, in their municipality. Process of decentralization in the years 2002 - 2004 passed the scope of provides social services to municipalities and autonomous regions. This process was focused on increasing of the responsibility and autonomy of municipal authorities in meeting the needs of the population, increasing their competence. The primary purpose of the decentralization process was to ensure the availability of social services to citizens, while respecting the principle of subsidiarity. An equally important factor was to ensure the effectiveness and efficiency of social services. In order to enhance self scope of municipalities in providing of social services, their decentralization has been carried out.

The role of municipal authorities in providing social services has increased substantially since 2003, when in connection with the implementation of public administration reform were

competences of providers transferred directly to municipalities and higher territorial units. According to the conclusions of the Concept of development of social services, this step greatly contributed to the de - nationalization of social services, but the underlying purpose of the reform of public administration – to make public services closer to citizens, has not been filled. The fundamental cause of this is the fact that has not been complied promised state participation in financing social services, and therefore the majority social services institutions is not transferred to the individual towns and villages, as was originally planned, but on the municipalities and regional offices. Providing of social services such as the agenda of towns and municipalities is mainly financed from own revenues of municipal authorities. For admission to certain types of social service institutions (retirement homes, social services) citizens are waiting for several years and are placed on waiting lists. Preferably they are placed only citizens who are at risk of life and health. In institutions of private providers is not as long waiting time for admission to this institutions, but care in these institutions is more expensive and appropriate only for clients who have sufficient income and estate.

The main consumers of social services are seniors and people with disabilities. Providing of social services to these people comes from philosophy of the Independent Living Model that is based on the thesis that people with disabilities are responsible to make decisions. They have a fundamental right of choice and selection equal opportunities and options than other people. The central idea is "nothing about us without us". The model is characterized by use of the terms self - determination, self - respect and equal rights. The clients can choose social services according to their special individual needs:

- Social services to ensure the necessary conditions to meet basic needs in the facilities (dormitory, shelter, half-way houses, daily low-threshold centre and emergency housing).
- Social services to support families with children (Assistance with personal care of children and support of reconciliation of family life and professional life, Institution of temporary care of children, Low - threshold day centre for children and families)
- Social services to address the unfavourable social situations because of severe disability and ill health (Institution of supported housing, Rehabilitation, Home of Social, Specialized, Day - care centre/ stationary, Care services, Transport services, Guides and reading services, Interpreting - providing service, Intermediation of Interpreting Services, Personal assistance intermediation, Lending of the devices)
- Social services by using telecommunications technologies (monitoring and signalling the need for aid and emergency assistance provided through telecommunications technologies)
- Supportive services (Respite care, Day – care centre, Integration centre, Dining room, Laundry service, Centre of hygiene)

Forms of providing social services are ambulatory, field, or other institutional and shall be provided by unfavourable social situation and environment in which the individual resides. All social service providers are required to activate the recipient of social services according to his opportunities and abilities to take into account their individual needs, provide social services at a professional level, together with the family, village or community in shaping the conditions for the return of the recipient of social services provided in a facility with year - round residence in the natural form of family or community environment.

Social work in Slovak Republic

Social Work is one of the most important tools in both state and civil activities within the field of social affairs. Social work as a profession had not existed in reality before 1989; therefore there was a need of establishing of social work education after the democratic changes. It was necessary to start with the education in social work on university level to secure the professionalization of in this field. The education of social work was starting in Bratislava in 1991, one year later in Trnava. This fact was opening the doors for the theoretical discussions about social work as a professional and scientific discipline.

The Code of Ethics of Social Workers in Slovakia, introduced in 1997, set the new perspective of social work that requires expertise, individual prerequisites, personal input and involvement in relationships with clients and colleagues on the side of social workers. The activities of social workers are called help, support and accompanying guidance. Social workers are guided by the International Code of Ethics and other internationally acknowledged standards in their work.

They include:

- Assisting people in developing their capabilities which help them handle their individual or group social challenges,
- Supporting their independence, adaptability and development,
- Promoting fair social strategies for services and alternatives to the existing social and economic resources,
- Providing information and contact with institutions offering social and economic resources (The Code of Ethics of Social Workers in Slovakia of 1997).

Social workers, as seen by Strieženec (1996) have a set of structural, psychological and physiological features required for accomplishment of societal desired effectiveness of professional work. The author further developed his definition: “Social workers are in the position of agents, active agents activating the social potential of their clients; they are co-authors of their decision to co-participate in “helping to self-help”, to initiate, to act as active agents and frequently also as those who trigger the activities of their clients.” (Strieženec, 2006). Social workers focus their activities on preventing social problems, trying to avoid aggravation of identified and revealed problems by using their professional capacities (knowledge and skills) and personal input.

Social workers sometimes perceive their profession as an execution of powers or even a “ruling” power entrusted to them based on their profession. Powers are usually defined in a Code of Conduct of an organization or they are drawn from the so-called unwritten rules of the facilities, the corporate culture or result from the “client-social worker” situation. The power of the social worker in that relationship may be forced by the social worker or elicited by the client. It draws from the assumption that the social worker is an expert in the area and for that reason his/her decision is the only right one and must be, and frequently actually is willingly, accepted by the client. Another “source” of power of a social worker is that the social worker represents the power of the system (the state, the institution). In such cases one can see in clients not only respect for, but also fear from, reprisals by social workers (in

situations where the social worker has certain powers such as taking a child from his/her parents). (Šramatá, Kállay 2010)

After the difficult new start of social work after the 1989 is it very important to coordinate the next steps of the social work as a professional discipline and independent scientific discipline. The very important step is the definition of social work and social worker by a society accepted institution. This should happen in the coming future and will be very important for the social work in the science, social policy and social services.

Subjective wellbeing in Slovak Republic

Subjective well-being is an important indicator of the level of social development. The field of subjective well-being (SWB) comprises the scientific analysis of how people evaluate their lives—both at the moment and for longer periods such as for the past year. These evaluations include people's emotional reactions to events, their moods, and judgments they form about their life satisfaction, fulfilment, and satisfaction with domains such as marriage and work (Diener, Oishi, Lucas, 2003). Researchers nowadays are less interested in simply describing the demographic characteristics that correlate with subjective wellbeing, instead they focus on understanding the processes that underlie happiness (Diener et. al, 1999). In 2013 there are not enough specific empirical data on subjective well-being available in Slovakia except studies about social disparity (Bunčák, 2010, in: Pavelek, Traegerova, 2013) or life environment (Džambazovič, 2010, in: Pavelek, Traegerova, 2013). A new pilot study on subjective well-being from Central European Labour Studies Institute (CELSI) was realized in 2013 but not published yet. Considering this current unavailability of specific data on a regional level, we can illustrate the state of subjective wellbeing in Slovak Republic using the Better Life Index studies carried out by OECD for every member state.

Happiness or subjective well-being can be measured in terms of life satisfaction, the presence of positive experiences and feelings, and the absence of negative experiences and feelings. Such measures, while subjective, are a useful complement to objective data to compare the quality of life across countries. Life satisfaction measures how people evaluate their life as a whole rather than their current feelings. It captures a reflective assessment of which life circumstances and conditions are important for subjective well-being. When asked to rate their general satisfaction with life on a scale from 0 to 10, Slovaks gave it a 5.9 grade, lower than the OECD average of 6.6. There is little difference in life satisfaction levels between men and women across OECD countries. This is true in the Slovak Republic, where men gave their life a 6.0 grade and women 5.9. Education levels do, however, strongly influence subjective well-being. Whereas people who have only completed primary education in the Slovak Republic have a life satisfaction level of 5.6, this score reaches 6.7 for people with tertiary education. Happiness, or subjective well-being, is also defined as the presence of positive experiences and feelings, and/or the absence of negative experiences and feelings. In the Slovak Republic 75% of people reported having more positive experiences in an average day (feelings of rest, pride in accomplishment, enjoyment, etc) than negative ones (pain, worry, sadness, boredom, etc). This figure is lower than the OECD average of 80% (OECD, 2013).

Conclusion

Transformation of both society as well as social policy in Slovakia could be considered terminated. There are still changes in these fields, but we consider them an inherent part of development. Transformation or better reestablishment of social work as independent profession and scientific discipline is still in the process. Law of Social work as a profession (should be introduced in 2014) should bring positive effect to this process, especially in clarification of social worker as a professional, education standards, specialisations and competencies within social and health systems, etc.

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